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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION			Attorney Docket Number	er 2570-1-001 N
			First Named Inventor	Leonidas Stamatatos
			COMPLETE IF KNOWN	
(37 CFR 1.63)		Application Number		
Declaration Submitted With Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date			
	Group Art Unit			
	Examiner Name			

As a below named inventor, I hereby declare that:				
My residence, mailing address, and citizenship are as stated below next to my name.				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: HIV-1- VACCINES AND SCREENING METHODS THEREFOR				
		-		
the specification of which	(Title of the Invention)		
x is attached hereto				·
OR		as United S	States Application I	Number or PCT International
□ was filed on (MM/DD/YYYY) [(if applicable).				
Application Number and was amended on (MM/DD/YYYY)				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			0000	
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.				
Application Number(s)	Filing Da	te (MM/DD/YYYY)	Addition	al provisional application
50/214,608	June 27, 2	2000	numbers supplem	ental priority data sheet /02B attached hereto.

[Page 1 of 2]
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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:				ed for this unsigned inventor		
Given Name Leonidas (first and middle [if any])			Family Name Stamatatos or Surname			
Inventor's Signature					·	Date .
Residence: City			State		Country	Citizenship
Mailing Address						
Mailing Address						
City	State			ZIP		Country
NAME OF SECOND INVENTOR	:			A petit	ion has been fil	ed for this unsigned inventor
Given Name Susan W. (first and middle [if any])				Family or Surn	Name Barnett	
Inventor's Signature						Date
Residence: City			State		Country	Citizenship
Mailing Address		_	A			
Mailing Address						
City	State			ZIP		Country
Additional inventors are being named		_suppleme	ntal Additio		ntor(s) sheet(s) PT	

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1			
Name of Additional Joint Inventor, if any:	A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])	Family Name or Surname			
Inresh	Srivastava			

Inventor's **Date** Signature Citizenship Residence: City Country State **Mailing Address Mailing Address** Country **State** ZIP City Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Family Name or Surname Given Name (first and middle [if any]) Inventor's Date Signature Citizenship Residence: City **State** Country **Mailing Address Mailing Address** ZIP Country State City Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Family Name or Surname Given Name (first and middle [if any]) Inventor's Date Signature Citizenship Country State Residence: City **Mailing Address Mailing Address** ZIP Country City State

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